

UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY

Dereen A. Wofford

11 Marshall st Passaic County jail 4G-2 unit

Paterson New Jersey 07501

(In the space above enter the full name(s) of the plaintiff(s).)

- against -

Jonathan K. Bustios (Both) #4818#

Mathew, Torres (Both) #4849#

Employed by Paterson Police Department

111 Broadway Paterson NJ 07501

COMPLAINT

Jury Trial: Yes No

(check one)

Alexis Torres #4869# (witness) To Arrest

John Farfan #4813# (witness To Arrest)

FRANK Torlego #4834# (witness) To Arrest

Employed by Paterson Police Department

111 Broadway Paterson New Jersey 07501

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name	<u>Dereen A. WOFFORD</u>
	Street Address	<u>11 Marsh st Passaic County jail 4g-2 unit</u>
	County, City	<u>Passaic Paterson NJ 07501</u>
	State & Zip Code	<u>New Jersey 07501</u>
	Telephone Number	<u>N/A</u>

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Johnathan K. Bustios #4818#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 2

Name MATHew Torres #4849#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 3

Name John farfan #4813#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

Defendant No. 4

Name Alexis Torres #4869# FRANK Tolledo #4834#
 Street Address 111 Broadway Paterson Police Department
 County, City PASSIC Paterson NJ 07501
 State & Zip Code New Jersey 07501

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. There are four types of cases that can be heard in federal court: 1) Federal Question - Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case; 2) Diversity of Citizenship - Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case; 3) U.S. Government Plaintiff; and 4) U.S. Government Defendant.

- A. What is the basis for federal court jurisdiction? (check all that apply)

Federal Questions Diversity of Citizenship
 U.S. Government Plaintiff U.S. Government Defendant

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? (2) Diversity of Citizenship - Under 28 U.S.C. § 1332.

Pernitive Damage's personal Injury by government official
(3) gun shot's wound's while HAND cuffing him my back lying face down
"(Reasonable suspicion)" "(Respectfully submitted)"

Helpful Hints:

- ~ All original papers submitted for consideration to the Court are to be filed with the **Clerk of this Court**. Copies of papers filed in this Court are to be served upon counsel for all other parties (or directly on any party acting pro se). Proof that service has been made is provided by a certificate of service. This certificate should be filed in the case along with the original papers and should show the day and manner of service.

Example: "I, (name), do hereby certify that a true and correct copy of the foregoing (name of pleading or other paper) has been served upon (name(s) of person(s) served) by placing the same in the U.S. Mail, properly addressed this (date) day of (month), (year)."

D'Leen A. Wafford
(Signature)

- ~ Any request for court action shall be set forth in a motion, properly filed and served. (Please see the Motion Guide included in this packet.)
- ~ No direct communication is to take place with the District Judge or United States Magistrate Judge with regard to this case. **All relevant information and papers are to be directed to the Clerk.**
- ~ The parties should notify the Clerk's office when there is an address change. Failure to do so could result in court orders or other information not being timely delivered, which could affect the parties' legal rights.

5/15/2017

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship Citizen U.S.

Defendant(s) state(s) of citizenship Citizen U.S. officers Paterson Police Department

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 117 MARTIN ST 21 Ave Apt #3 Paterson NJ 07501
Second floor,

B. What date and approximate time did the events giving rise to your claim(s) occur? ON The above
Date AND Time 1/230/2016 Approx 105 PM

C. Facts: ON The above date and Time 1/230/2016 105PM (5) Paterson Police officers
was dispatched to the above location 117 Martin st 21 Ave Apt#3 same floor ON

A Domestic dispute in which officer's proceed to break down the front door
of my apartment ex-gf's apartment , punch and strike me with close fist AND KICK
me in the face Officer Jonathan K. Bustros #4818 stand up over top of me
After officer MATHEW TORRES punches AND KICK ME several Times #MATHEW TORRES #4844
Struck me several time's in the Head/face AREA then Kick me after He hand cuffed me
behind my back lying face down on the floor officer Jonathan K. Bustros stand up
over me a fired (3) shot (2) of which struck my lower Extremities
Gilver's both Right leg AND Left leg calves and (1) shot in which broke
my humeral humerus Bone all posterior bilateral entry wounds from
behind in which You would call this type of shooting (Tactical Kill shots)
(3) other officer's where on scene however prior to shooting did not
enter the Apartment yet all officer state they never seen (Me)
with a (weapon) nor DID they here command's given by any
Officer's prior to the shooting (Please Reffer) to (Passic County)
"("Investigative Report") from the prosecutors office pg. -15 all officer
stated they never gave command's never seen me with a (weapon)
(prior to the shooting) Officer " (Frank Torre) " states He sees me lying (sof15)
face down on the floor IN hallway near bedroom Please Reffer to pg. 5 of 15
last to sentence stated by Officer FRANK TORRE #4834# (Responsible Respectfully submitted)

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. bruises swelling to my head and face area,

As well as (3) gunshot's wound's posterior and bilateral from behind why I was handcuffed laying face down on floor (1) bullet remain's lodged in my upper neural head still which I believe may further go to prove my insights to this initial incident) if evidence would be removed from my physical I have major displacement's and suffered a fracture which is permanently displaced my left shoulder, and sever leg pain in both Right and Left leg's. (Reasonable怀疑)

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

To pay for all medical exp losses wages Meives (therapy out patients once allowed to have my freedom (Releaser) (anomally A.S.A.P.) and amount of, 2,000,000,000 million Dollars I will never be the same nor will I walk the same or be able to hold my right footline of work (master mechanic) do to Displacement fractures

My ADD meidaite release 2,000,000,000. million dollars

All legal fees and Medical pain by the persons being sued
(percentage are respectively submitted)

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 15 day of 5/15/, 2017.

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

E-mail Address

D. L. a. Wofford
11 Marshall St Paterson NJ P.C.J. 4G-2 Unit
Passaic County Jail 4G-2 Unit
Paterson New Jersey 07501

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint.

Signature of Plaintiff:

D. L. a. Wofford